FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB A	OMB APPROVAL							
OMB Number: 3235-0076								
Expires:	May 31, 2005							
Estimated av	Estimated average burden							
hours per res	hours per response 16.00							

SEC USE O	NLY
Prefix	Serial
DATE RECEN	/ED
	1

Name of Offering (check if this is an amendment and name has changed, and indicate characteristic characterist	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Sec	
Type of Filing: New Filing Mamendment	
DOLO WENT TO A TOWN TO A T	
A. BASIC IDENTIFICATION DAT	A
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change	.)
Specialized Transportation Agent Group, Inc.	·
Address of Executive Offices (Number and Street, City, State, Zip	
6115 Stoneycreek Drive, Fort Wayne, Indiana 46825	800-262-7030 Ext. 101
Address of Principal Business Operations (Number and Street, City, State, Zi (if different from Executive Offices)	p Code) Telephone Number (Including Area Code)
Brief Description of Business	
See Attachment "A"	PROCESSE[
Type of Business Organization Corporation limited partnership, already formed	other (please specify):
▼ corporation	JUL 28 2004;
Actual or Estimated Date of Incorporation or Organization:	Estimated THOMSON FINANCIAL TO
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation	for State:
CN for Canada; FN for other foreign jurisdictio	n) [[N
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regu 77d(6).	alation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C
When To File: A notice must be filed no later than 15 days after the first sale of securities in the and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address which it is due, on the date it was mailed by United States registered or certified mail to that add	ss given below or, if received at that address after the date or
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington,	D.C: 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be photocopies of the manually signed copy or bear typed or printed signatures.	**************************************
Information Required: A new filing must contain all information requested. Amendments need thereto, the information requested in Part C, and any material changes from the information previous not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (UL ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice vare to be, or have been made. If a state requires the payment of a fee as a precondition to the accompany this form. This notice shall be filed in the appropriate states in accordance with states and must be completed.	with the Securities Administrator in each state where sales claim for the exemption, a fee in the proper amount shal
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the fe appropriate federal notice will not result in a loss of an available state exempt filing of a federal notice.	



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Enter the information re	•	•			
,	·	•	vithin the past five years;		
					f a class of equity securities of the issu
		•	Corporate general and mar	naging partners of	partnership issuers; and
Each general and r	nanaging partner o	f partnership issuers.			
Theck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
full Name (Last name first.) Shearer, Rob	f individual)				
Business or Residence Addre 6115 Stoneycree					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Palmer, Jeff	f individual)	- Para Mara Mara Maria Mar			
Business or Residence Addre 24660 Dequindre	•	Street, City, State, Zip C Michigan 4809	·		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, Fin, Brian	f individual)				
Business or Residence Addre 27 Sterling Roa			ode)		
Theck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
Galvagno, Remo					
usiness or Residence Addre 1280 116th Aven	•	• • • • • • • • • • • • • • • • • • • •			
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first,	f individual)			· · · · · · · · · · · · · · · · · · ·	
Battina, Dann					
usiness or Residence Addre		= = = = = = = = = = = = = = = = = = = =	ode)		
2480 Long Lake	Road, Rose	ville, MN 551	.13		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
all Name (Last name first, i	f individual)				
reeman, Jim	Marin - marina disease - marina periodi pagi pelatrikan ini di di di di di di di				All company on the specific property of the sp
usiness or Residence Addre		• ,			
1517 North Bro	adway Ext.	, Oklahoma Cit	y, Oklahoma 73	3114	
neck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ill Name (Last name first, i	f individual)				
Robson, Mark					
usiness or Residence Addre 1020 Nelson Ave				520	
			additional copies of this s)

	4				B. I	NFORMAT	ION ABOU	T OFFERI	NG.	* 4			
1.	Has the	e issuer sol	d. or does t	he issuer i	ntend to se	ll to non-a	ecredited i	nvestors in	this offer	inp?		Yes.	No
			-,			1 Appendix				-		V	
2.	What is	s the minin	num investr					-				s N/A	
	. Does the offering permit joint ownership of a single unit?										Yes,	No	
3.		-	-		•							Y	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. None Full Name (Last name first, if individual)												
	l Name (I/A	Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State, Z	Lip Code)						·
Non			- D - D -										
mar	ne oi As	ssociated B	roker or De	aler									
Stat	es in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			••••••••	☐ Al	l States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC)	FL	GA	[11]	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	TX]	NM UT	· NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
		[30]	[30]	110		[01]	<u> </u>	<u>(*A</u>)	<u> </u>	<u>[VY_V]</u>	[3/1]	<u>W 1</u>	PK
		Last name	first, if ind	ividual)									
	I/A iness or	Residence	Address (1	Number an	d Street C	ity State	Zin Code)						
			·										
Nan	ne of As	sociated B	roker or De	aler									
Stat	es in WI	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						· · · · · · · · · · · · · · · · · · ·
	(Check	"All State:	s" or check	individua	States)					***************************************		☐ All	States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[D]
		IN	IA	KS	KY	LA	ME	MD	MA	MI		MS	MO
	MT	NE	NV	NII	NJ	NM	NY	NC	ND	OH		OR	PA
	RI	SC	SD	TN	TX	ŪΤ	VT	VA	WA	[WV]	$[\underline{\mathbf{w}}]$	WY	PR
	,	Last name	first, if ind	ividual)									 ,
	I/A iness or	Residence	: Address (l	Number an	d Street, C	City, State,	Zip Code)						
Nam	ne of As	sociated B	roker or De	aler									
State	es in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit					- C - C - C - C - C - C - C - C - C - C		
	(Check	"All State:	s" or check	individual	States)						••••••	☐ All	States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA		ĪD
	IL	IN	[IA]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	[NV]	NH		NM	NY	NC VA	ND WA	OH		OR	PA
	MT										OK		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter theaggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	_{\$} 700,000	_{\$} 675,000
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	_{\$} 700,000	_{\$} 675,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	24	\$ 600,000
	Non-accredited Investors	3	\$ 75,000
	Total (for filings under Rule 504 only)	27	\$ 675,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering None	Security	Sold
	Rule 505		
	Regulation A None		\$
	Rule 504 None		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		§ None
	Printing and Engraving Costs		§ None
	Legal Fees	V	\$_50,000
	Accounting Fees	Y	\$_20,000
	Engineering Fees	 -	\$ None
	Sales Commissions (specify finders' fees separately)		\$ None
	Other Expenses (identify)	 -	\$ None
	Total	<u>V</u>	\$ <u>70,000</u>

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gros proceeds to the issuer."	S	§ 630,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate an check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	d	
		Payments to	
		Officers, Directors, &	Payments to
		Affiliates	Others
	Salaries and fees	∏ § None	□\$ None
	Purchase of real estate		∏\$ None
	Purchase, rental or leasing and installation of machinery		
	and equipment		S_None
	Construction or leasing of plant buildings and facilities	None S_None	None S
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		**
	issuer pursuant to a merger)	_	□ \$ None
	Repayment of indebtedness	\$ <u>None</u>	□ \$ None
	Working capital	. 🔲 \$	√ \$ 315,000
	Other (specify): See Attachment "B"	\$	315,000
		. [] э	
	Column Totals	. 🔲 \$	\$
	Total Payments Listed (column totals added)	. <u> </u>	530,000
	D. FEDERAL SIGNATURE		9.54
			<u> </u>
	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice Ature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comm		
	nformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of		in request of its stat

Issuer (Print or Type)
Specialized Transportation Agent Group, Inc. Name of Signer (Print or Type)

Title of Signer (Print or Type)

President

Rob Shearer

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	ielinis (m. 1904). 1907 - Paris Marie (m. 1904). 1908 - Paris Marie (m. 1904).	E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 proprovisions of such rule?			es No				
	See	Appendix, Column 5, for state resp	onse.					
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as require	<u> </u>	ny state in which this notice is filed	d a notice on Form				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	The undersigned issuer represents that the iss limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establish	ate in which this notice is filed and	understands that the issuer claimin					
	ner has read this notification and knows the conte thorized person.	nts to be true and has duly caused th	s notice to be signed on its behalf b	y the undersigned				
Issuer (Spec :	Print or Type) ialized Transportation Agent Group, Inc.	Signature	Date 03/11/00	/				
Name (I	Print or Type)	Title (Print or Type)	7					
Rob S	Shearer	President						

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	t		Section 1981	Al	PENDIX					
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and irchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		X	None							
AK		X	None							
AZ		X	50,000	2	50,000	None	N/A		X	
AR		X	None							
CA		X	100,000	4	100,000	None	N/A	i	x	
СО	X		50,000	1	25,000	1	25,000		X	
СТ		Х	None							
DE		X	None							
DC		X	None							
FL		X	25,000	1	25,000	None	N/A		X	
GA		X	None							
HI		X	None							
ID		X	None							
IL	X		100,000	2	50,000	2	50,000		X	
IN		X	None							
IA		X	None							
KS		X	None							
KY		X	None							
LA		X	None							
ME		X	None							
MD		X	None							
MA		X	50,000	2	50,000	None	N/A		X	
MI		X	25,000	1	25,000	None	N/A		X	
MN		X	25,000	1	25,000	None	N/A		Х	
MS		X	None							
		l		L	<u> </u>	L	L	<u> </u>	4	

APPENDIX 1 2 3 4 5 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell to non-accredited offering price Type of investor and explanation of offered in state waiver granted) investors in State amount purchased in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount Investors Amount Yes No X None MO MT X None X NE None NV 25,000 1 25,000 None N/A X X None NH X 43,750 NJ 50,000 2 None N/A X X NMX None 50,000 X 2 NY 31,250 None N/A X NC None X ND X None OH 25,000 25,000 1 None N/A X X OK 25,000 1 25,000 X None N/A X OR None X PA 25,000 1 X 25,000 N/A None X RI None X SC X None SD None X TN X None TXNone X X UT 25,000 1 25,000 N/A None X VTNone X VA X None 25,000 1 WA 25,000 N/A None X X None WV X WI 25,000 1 25,000 None N/A X X

				APP	ENDIX				
1	Intend to non-a investor	2 I to sell accredited is in State	Type of security and aggregate offering price offered in state		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted)				
State	Yes	No	(Part C-Item 1)	Number of Accredited Investors	(Part	C-Item 2) Number of Non-Accredited Investors	Amount	Yes	No
WY		Х	None						
PR		X	None						

Attachment "A"

Brief Description of Business

The Company has been organized to pursue and negotiate the potential acquisition of a high value products transportation business that will utilize trailers for the delivery of certain limited products.

Attachment "B"

Section C-5

Proceeds of this limited offering will be used for the formation of the Company and to negotiate, develop and pursue a business plan for the potential acquisition of a high value products transportation business.